2006 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Feb 28, 2006 08:00 AM
Secretary of State

DOCUMENT # N20580

1. Entity Name
HOPE COMMUNITY CHURCH OF ORLANDO, INC.

Principal Place of Business	Mailing Address
1925 WEST COUNTY ROAD 419 OVIEDO, FL 32765 US	PO BOX 622588 OVIEDO, FL 32762 US

02222006 No Chg-NP CR2E037 (11/05)

DO NOT WRITE IN THIS SPACE

4. FEI Number
59-3183943
☐ Applied For
☐ Not Applicable

5. Certificate of Status Desired ☐ **$8.75** Additional Fee Required

6. Name and Address of Current Registered Agent

GREENE, DAVID F
PO BOX 622588
OVIEDO, FL 32762

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8. The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. I am familiar with, and accept the obligations of, registered agent.

SIGNATURE David F. Greene DAVID F GREENE - P/CEO 2/23/06
Signature, typed or printed name of registered agent and title if applicable. (NOTE: Registered Agent signature required when reinstating) DATE

Filing Fee is $61.25
Due by May 1, 2006

9. Election Campaign Financing Trust Fund Contribution. ☐ **$5.00** May Be Added to Fees

000000452365
03/11/06-80024-001 61.25

10. OFFICERS AND DIRECTORS

TITLE	P
NAME	GREENE, DAVID F
STREET ADDRESS	687 CHEOY LEE CIRCLE
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	D
NAME	BOURQUE, PIERRE A
STREET ADDRESS	926 KERWOOD CIRCLE
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	T
NAME	DEBELAK, DAVID
STREET ADDRESS	854 KINGSBRIDGE DRIVE
CITY-ST-ZIP	OVIEDO, FL 32765
TITLE	D
NAME	LUKE, MARK
STREET ADDRESS	1434 VAN HERCKE LANE
CITY-ST-ZIP	CHULUOTA, FL 32766
TITLE	D
NAME	SNYDER, GREGORY A
STREET ADDRESS	1588 EAGLE NEST CIRCLE
CITY-ST-ZIP	WINTER SPRINGS, FL 32708
TITLE	S
NAME	SANDERS, MATTHEW E
STREET ADDRESS	4423 BROOK HOLLOW CIRCLE
CITY-ST-ZIP	WINTER SPRINGS, FL 32708

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12. I hereby certify that the information supplied with this filing does not qualify for the exemptions contained in Chapter 119, Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 10 or Block 11 if changed, or on an attachment with an address, with all other like empowered.

SIGNATURE: David F. Greene DAVID F GREENE - P/CEO 2/23/06 407-366-
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR Date Daytime Phone #